

DESCRIPTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	1/2/01
FORMALITY REVIEW	SS	JCS77	01-11-01
RESPONSE FORMALITY REVIEW	lt	907	5-4-01

INDEX OF CLAIMS

- ✓ Rejected
= Allowed
- (Through numeral)... Canceled
÷ Restricted

N Non-elected
I Interference
A Appeal
O Objected

Claim	Date									
Final	Original	1	2	3	4	5	6	7	8	9
1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
6	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
7	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
8	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
9	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
10	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
11	0	✓	✓	✓	✓	✓	✓	✓	✓	✓
12	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
13	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
14	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
15	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
16	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
17	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
18	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
19	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
20	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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Claim	Date									
Final	Original	1	2	3	4	5	6	7	8	9
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Claim	Date									
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If more than 150 claims or 10 actions
staple additional sheet here

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